

Application Data Sheet

Application Information

Application number::	Not Yet Assigned
Filing Date::	September 17, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Apparatus And Method For Verifying Print Quality Of An Encoded Indicum
Attorney Docket Number::	283-381
Request for Early Publication::	No
Request for Non-Publication::	Yes
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor #1
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Charles
Middle Name:: E.
Family Name:: Biss
Name Suffix::
City of Residence:: Auburn
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3192 Barrington Way
City of Mailing Address:: Auburn
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13021

Applicant Authority Type:: Inventor #2
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Andrew
Middle Name::
Family Name:: Longacre
Name Suffix:: Jr.
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 21 Leitch Avenue
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor #3
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: William
Middle Name:: H.
Family Name:: Havens
Name Suffix::
City of Residence:: Marcellus
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 25 South Street, Apt. B-33
City of Mailing Address:: Marcellus
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13108

Applicant Authority Type:: Inventor #4
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Donna
Middle Name:: M.
Family Name:: Fletcher
Name Suffix::
City of Residence:: Auburn
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 7337 Cherry Street Road
City of Mailing Address:: Auburn
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13021

Applicant Authority Type:: Inventor #5
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Eunice
 Middle Name::
 Family Name:: Sonneville
 Name Suffix::
 City of Residence:: Ontario
 State or Province of Residence:: NY
 Country of Residence:: US
 Street of Mailing Address:: 5759 Slocum Road
 City of Mailing Address:: Ontario
 State or Province of Mailing Address:: NY
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 14519

Correspondence Information

Correspondence Customer Number:: 20874

Representative Information

Representative Customer Number::	20874
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::